

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: John A. Josko et al. :  
: Art Unit: 3692  
Serial No.: 09/878,685 :  
: Examiner: Siegfried E. Chencinski  
Filed: June 11, 2001 :  
:  
For: METHODS AND SYSTEMS :  
FOR SOLICITING, :  
SUBMITTING, AND :  
MANAGING APPRAISALS :

**Mail Stop: AF**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

**TRANSMITTAL**

1. Transmitted herewith is:  
Transmittal (3 pages)  
Request for Reconsideration After Final Office Action mailed January 2, 2008  
(21 pages)

**STATUS**

2. Applicant  
☐ claims small entity status.  
☒ is other than a small entity.

### EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

| Extension for response within:                  | Other than small entity Fee | Small entity Fee (if applicable) |
|---|-----------------------------|----------------------------------|
| <input checked="" type="checkbox"/> first month | \$ 120.00                   | \$ 60.00                         |
| <input type="checkbox"/> second month           | \$ 460.00                   | \$ 230.00                        |
| <input type="checkbox"/> third month            | \$ 1,050.00                 | \$ 525.00                        |
| <input type="checkbox"/> fourth month           | \$ 1,640.00                 | \$ 820.00                        |
| <input type="checkbox"/> fifth month            | \$ 2,230.00                 | \$1,115.00                       |

Fee: \$120.00

If an additional extension of time is required, please consider this a petition therefor.

*(Check and complete the next item, if applicable)*

An extension of \_\_\_\_\_ months has already been secured. The fee paid  
therefor \$ \_\_\_\_\_ is deducted from the total fee due for the total months  
of extension now requested.

Extension fee due with this request \$120.00

OR

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

### FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

|   | (Col 1)                          |       | (Col 2)                         | (Col 3)       | SMALL ENTITY            |    | OTHER THAN SMALL ENTITY |
|---|----------------------------------|-------|---------------------------------|---------------|-------------------------|----|-------------------------|
|   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | ADDITIONAL RATE FEE     | OR | ADDITIONAL RATE FEE     |
| TOTAL INDEP                               |                                  | MINUS |                                 | -             | x \$25.00 = \$          |    | x \$50.00 = \$          |
|   |                                  | MINUS |                                 | -             | x \$105.00 = \$         |    | x \$210.00 = \$         |
| FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |                                  |       |                                 |               | + \$185.00 = \$         |    | + \$370.00 = \$         |
|   |                                  |       |                                 |               | TOTAL ADDITIONAL FEE \$ | OR | TOTAL ADDITIONAL FEE \$ |

- (a) ☒ No additional fee for Claims is required

OR

- (b) ☐ Total additional fee for claims required \$ \_\_\_\_\_

### FEE PAYMENT

5. Attached is a check in the sum of \$ \_\_\_\_\_


- ☒ Charge Deposit Account No. 01-2384 the sum of \$120.00.  
A duplicate of this transmittal is attached.

### FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. ☐ Other:

  
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